Form P26

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DEC 17 2004

IN TED STATES PATENT AND TRADEMARK OFFICE

Application of:

Atty Docket No.: 55121-88011

Koplar, Edward J. et. al

Group Art Unit: 2611

Serial No.: 09/489,373

Examiner: Saltarelli, Dominic D

Filed: January 21, 2000

For: INTERACTIVE OPTICAL CARDS AND OTHER HAND-HELD DEVICES

WITH INCREASED CONNECTIVITY

CERTIFICATION OF FACSIMILE TRANSMISSION

Mail Stop: Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

TO: Facsimile #703-872-9306

Commissioner for Patents

PO Box 1450

Alexandria, VA 22313-1450

FROM: Randy L. Canis

Greensfelder, Hemker & Gale, P.C. Intellectual Property Group

Number of Pages Transmitted (including this page): 14

I hereby certify that these papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Response and Amendment Transmittal;

Amendment D;

Please charge any additional costs, or credit any overpayment or refund, to our Deposit Account No. 07-1985.

Respectfully submitted,

12/17/2004

Greensfelder, Hemker & Gale, PC

10 S. Broadway, Suite 2000

St. Louis, Missouri 63102 314-241-9090 Telephone

314-345-4704 Facsimile

764263

Application of:

Form P17

RECEIVED CENTRAL FAX CENTER

DEC 17 2004

Atty Docket No.: 55121-88011

Koplar, Edward J. et. al

Group Art Unit: 2611

Serial No.: 09/489,373

Examiner: Saltarelli, Dominic D

Filed: January 21, 2000

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INCREASED CONNECTIVITY

RESPONSE AND AMENDMENT TRANSMITTAL

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Examiner Interview conducted on December 15, 2004, transmitted herewith is the following:

[X] Response and Amendment D (11 pages);

[] Petition for Extension of Time;

[] Other:

Fee Determination:

Claims	Total Number of Claims After Amendment	Highest Number of Claims Originally Paid For	Number of Additional Claims	Rate	Additional Cost
Total Claims (37 CFR 1.16(c))	24	- 70	0	x \$18.00 =	\$0.00
Independent Claims (37 CFR 1.16(b))	4 -	- 13	0	x \$88.00 =	\$0.00
Total				=	\$0,00
Fee for Extension of Time (if applicable)				+	\$0.00
Less Small Entity Deduction (if applicable)				x 50%	\$0.00
Total Enclosed				=	\$0.00

The above fee is being paid by:

[] Enclosed check;

764261

Form P17

[X] Please charge Deposit Account 07-1985 in the amount of \$0.00.

Please charge any deficiency in fees and please credit any excess in fees to Deposit Account 07-

1985.

Respectfully submitted,

12/17/2004 Date

Randy L. Canis, Reg. No. 44,584

Attorney for Applicant

CUSTOMER NUMBER: 22807 Greensfelder, Hernker & Gale, PC 10 S. Broadway, Suite 2000 St. Louis, Missouri 63102 314-241-9090 Telephone 314-345-4704 Facsimile